Application Data Sheet

Application Information

Application number::

Filing Date::

Application Type::

Regular

Subject Matter::

Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?::

None

Number of CD disks::

Number of copies of CDs::

Sequence submission?::

Computer Readable Form

(CRF)?::

No

Number of copies of CRF::

Title::

A MICROBIAL PROCESS TO

PREPARE5-ANDROSTEN-3BETA,7ALPHA,15ALPHA-TRIOL-1

7-ONE AND RELATED ANALOGUES

Attorney Docket Number:: 1467.US1

Request for Early

Publication?::

No

Request for

Non-Publication?::

No

Suggested Drawing Figure::

Total Drawing Sheets::

Application Data Sheet

Application Information

Small Entity?::

Latin name::

Variety denomination name::

Petition included?::

Petition Type:: No

No

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Britain

Status:: Full Capacity

Given Name:: Michael

Middle Name:: John

Family Name:: White

Name Suffix::

City of Residence:: Portage

State or Province of Residence:: Michigan

Country of Residence:: USA

Street of mailing address:: 7049 Moorsbridge Road

City of mailing address:: Portage

State or Province of mailing address:: Michigan

Country of mailing address:: USA

Postal or Zip Code of mailing address:: 49024

Applicant Authority Type:: Inventor

Primary Citizenship Country:: USA

Status:: Full Capacity

Given Name:: Ivan

Middle Name:: Gale

Family Name:: Gilbert

Name Suffix::

City of Residence:: Kalamazoo

State or Province of Residence:: Michigan

Country of Residence:: USA

Street of mailing address:: 7350 East ML Avenue

City of mailing address:: Kalamazoo

State or Province of mailing address:: Michigan

Country of mailing address:: USA

Postal or Zip Code of mailing address:: 49048

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Correspondence Information

Correspondence Customer Number:: 25533

Name:: Pharmacia & Upjohn Company

Street of mailing address:: Global Intellectual Property

301 Henrietta Street

City of mailing address:: Kalamazoo

State or Province of mailing address:: MI

Country of mailing address:: USA

Postal or Zip Code of mailing address:: 49007

Phone number:: (269) 833-9500

Fax Number:: (269) 833 2316

E-Mail address::

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Representative Information

Representative Customer	
Number::	25533

Representative Designation::	Registration Number::	Representative Name::
		-

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